

PTO

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---|------------|---|--------------|
| ✓ | Rejected | N | Nonrebutted |
| ✓ | Allowed | I | interference |
| ✓ | Cancelled | A | Appeal |
| ✓ | Restricted | C | Objection |

| Claim | Date | Claim | Date | Claim | Date |
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